

MATURE DRIVER IMPROVEMENT COURSE CERTIFICATE, OL 1001 ORDER FORM

Instructions:

- Print clearly in black ink or type.
- This order form will only be accepted for ordering Mature Driver Improvement Course Certificates. Any changes made to this order form for a different type will *not* be accepted, and incomplete order forms will *not* be filled.
- Mail completed order form to: Department of Motor Vehicles, Business Licensing Unit, Mail Station L224, P.O. Box 932342, Sacramento, CA 94232-3420

Important: Pursuant to Section 1677(c) CVC, no course provider approved under this article shall do any of the following:

Furnish course completion certificates to course enrollees prior to, or in the absence of, completion of the curriculum, or charge fees in excess of the amounts specified in Section 1676(a) and (c) of the CVC.

Please send	Mature Driver	Improvement Course	Certificates to:
NUMBER	OF BOOKS (CERTIFICATES S	OLD IN BOOKS OF 100 ONLY. THE FEE IS	; \$100.00 PER BOOK.)
BUSINESS NAME			PROVIDER ID NUMBER
BUSINESS ADDRESS		MAIL TO ADDRESS (IF AUTHORIZE	ED BY DMV)
CITY	STATE ZIP CODE	CITY	STATE ZIP CODE
I certify (or declare) under penalty of p Must be signed by an individual, parti			
PRINTED NAME		TITLE	AREA CODE/TELEPHONE NUMBER
SIGNATURE			DATE
Note: Allow 4 – 6 weeks to process yeard sign for shipment.	our order. Courier Service	will deliver all orders. So	meone must be present to receive
If the above address differs from our Number.	records, please submit c	hanges on business letter	rhead and include the Provider ID
FOR DEPARTMENTAL USE ONLY	Complete this section w	hen issuing Mature Driver	Improvement Course Certificates.
DATE ORDER RECEIVED	BEGINNING NUMBER	ENDING NUM	/BER
PAID BY Check Money Order	☐ Other	AMOUNT EN	CLOSED
DATE SENT TO SCHOOL	ISSUING EMPLOYEE'S PRINTED N	NAME ISSUING EM	PLOYEE'S SIGNATURE